



ASC Utilization Report
State Form 49933 (R3/6-05)
Indiana State Department of Health
Acute Care

Status: Finalized

I. Center Identification

Organization Name: INDIANA ENDOSCOPY CENTERS

Street Address: 1801 N. Senate Blvd. Ste 710

City: Indianapolis

County: Marion

Administrator Name: Caryn Fink

Administrator Email: cfink1@iuhealth.org

ASC Web Address:

Fiscal Year: 2018

Accredited: Yes No

Name of Accrediting Body: AAAHC

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	0
Number of procedure rooms	4

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	5055	4211
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
43239	959	
45385	936	
45380	709	
45378	433	
G0121	362	
43235	181	

43248	137
G0105	115
43450	103
43249	58

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	0
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